In

Insurance Benefits

Public Employees' Retirement System (PERS)
Teachers' Retirement System (TRS)
Judicial Retirement System (JRS)
Elected Public Officers Retirement System (EPORS)

Medical Plan

Retiree medical insurance coverage will be provided without cost to you and your eligible dependents when you begin receiving benefits. You will, however, be required to pay the annual deductibles and any expenses that exceed the usual, customary, and reasonable charge (UCR). Details about this coverage are provided in the Retiree Insurance Information Booklet.

This coverage will continue as long as you or your survivors are eligible to receive monthly benefits from the system. Coverage will terminate when benefits are no longer payable.

When you or your spouse turn age 65, Medicare will become the primary carrier and coverage under the AlaskaCare Retiree Health plan will supplement your Medicare coverage. It is important to enroll in Medicare as soon as you or your spouse become eligible so that your medical expenses will be covered at the maximum level (see back side).

A health insurance identification card will be mailed to you as soon as the claims administrator receives your eligibility from us—generally about one week after your first benefit check is issued.

Exceptions

The following PERS and TRS benefit recipients are **not automatically covered** under the retiree medical insurance plan:

- ➤ PERS members who are first hired under the PERS after June 30, 1986, and their survivors; and
- ➤ TRS members who are first hired under the TRS after June 30, 1990, and their survivors.

Dental-Vision-Audio (DVA) Plan

You may purchase DVA group insurance coverage for:

- (1) yourself only,
- (2) yourself and your spouse,
- (3) yourself and your eligible dependent children, or
- (4) yourself, your spouse, and eligible dependent children.

Details about this coverage are provided in the Retiree Insurance Information Booklet. The current premium rates are shown on the Health Benefits Enrollment/Waiver form.

If you want to receive DVA coverage, you must complete a Health Benefits Enrollment/Waiver form. Your form must be received by the Division of Retirement and Benefits or postmarked **before your retirement date**.

DVA coverage will be offered to you **only once**. If your Enrollment/Waiver Form is not received or postmarked before your retirement date, your right to participate will automatically be waived and you will be unable to enroll later.

If you enroll in the DVA Plan, your coverage will take effect on the first day of retirement.

Long-Term Care (LTC) Insurance

You may purchase LTC group insurance coverage for yourself only, or coverage for both you and your spouse. Details about the options available are provided in the Long-Term Care Plan Booklet. The current premium rates are shown on the Health Benefits Enrollment/Waiver form.

If you want to receive LTC coverage, you must complete a Health Benefits Enrollment/Waiver form. Your form must be

received by the Division of Retirement and Benefits or postmarked **before your retirement date**.

LTC coverage will be offered to you **only once**. If your Enrollment/Waiver form is not received or postmarked before your retirement date, your right to participate will automatically be waived and you will be unable to enroll later.

If you enroll in the LTC Plan, your coverage will take effect on the first day of retirement.

Optional Life Insurance Plan

If you are participating in a state-sponsored Optional Life Insurance Plan, you may elect to continue your coverage by completing an *Optional Life Insurance Continuation/Waiver form*. Your form must be received by the Division of Retirement and Benefits or postmarked **before your retirement date**.

The opportunity to continue this coverage will be offered to you **only once**. If your *Continuation/Waiver* form is not received or postmarked by the deadline, your right to participate in the plan will automatically be waived and you will be unable to enroll later. Details about the coverage are provided in the Retiree Insurance Information Booklet.

AlaskaCare and Medicare

There are four parts to Medicare health coverage: Part A "hospital services," Part B "physician's services," Part D "prescription drugs," and Medicare Advantage Plans, like HMOs and PPOs, called Part C. A summary of Parts A, B, and D and how they relate to the AlaskaCare plan follows. (Contact Medicare for information on Part C.) Detailed information about Medicare Parts A, B, and D is provided in the AlaskaCare Retiree Health Plan Welcome Kit, available online at:

www.state.ak.us/drb/ghlb/retiree/retiree-welcome-kit.shtml.

Coverage under AlaskaCare becomes supplemental to Medicare Parts A & B beginning the month that you or your dependents first become eligible to receive benefits. If you do not enroll in Medicare Part B, the estimated amount Medicare would have paid will be deducted from your claims before processing by AlaskaCare.

Part A—Hospital Services

- Almost everyone is eligible for premium-free Part A.
- Enrollment in Part A is automatic when you begin receiving Social Security benefits.
- AlaskaCare plan becomes supplemental to Part A.
- If you are ineligible for Part A, AlaskaCare remains your primary carrier and your benefits are not reduced.

Part B—Physician's Services

- Everyone is eligible for Part B, for which you pay a premium.
- You must purchase Part B as soon as you become eligible or you may pay more for the coverage later.
- AlaskaCare plan becomes supplemental to Part B.
- If you don't purchase Part B, AlaskaCare will deduct the estimated amount Medicare would have paid from your claims before payment.

Part D—Prescription Drugs

- Part D was effective January 1, 2006.
- Everyone is eligible for Part D, for which you pay a premium.
- Additional premium is estimated at \$37 per month if you purchase Part D.
- AlaskaCare drug benefit is **at least as good as** the benefit offered under Part D.
- AlaskaCare plan becomes supplemental if you purchase Part D.
- You can keep AlaskaCare coverage and not pay extra if you later decide to purchase Part D.

Need more information about Medicare enrollment?

Contact the Social Security Administration at their toll free number—1 (800) 772-1213.

ENCLOSED (if checked)

- ☐ Retiree Insurance Information Booklet
- Long-Term Care Plan Booklet
- ☐ Health Benefits Enrollment/Waiver Form
- Optional Life Insurance Continuation/Waiver Form
- ☐ Insurance Claim Forms

Division of Retirement and Benefits

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